

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

SECRETARY OF STATE
DIVISION OF CORPORATIONS

03 OCT 20 AM 10:32

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DOCUMENT # L02000019975

1. Limited Liability Company's Name

Northwest Florida Underground, LLC

2. Principal Office Address

5227 Soundside Drive

Suite, Apt. #, etc.

3. Mailing Office Address

5227 Soundside Drive

Suite, Apt. #, etc.

City & State

Gulf Breeze, Florida

City & State

Gulf Breeze, Florida

Zip

32561

Country

Santa Rosa

Zip

32561

Country

Santa Rosa

4. State/Country of Formation

Florida/United States

5. Date Organized or Qualified

To Do Business in Florida 08/06/2002

6. FEI Number

51-0419202

Applied For

Not Applicable

7. CERTIFICATE OF STATUS DESIRED ☐

\$5.00 Additional Fee required
for a Certificate of Status

8. Name and Address of Current Registered Agent

Name

Thomas E. Doughty

Street Address (P.O. Box Number is Not Acceptable)

5227 Soundside Drive

Suite, Apt. #, Etc.

City

Gulf Breeze

State

FL

Zip Code

32561

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of
Registered Agent

Thomas E. Doughty
REGISTERED AGENT MUST SIGN

Date 10-08-03

10. Names and Street Addresses of Managing Members/Managers

Titles	Name of Managing Members/Managers	Street Address of Each Managing Member/Manager	City / State / Zip
Mgrm	Doughty, Thomas E.	5227 Soundside Drive	Gulf Breeze, FL 32561

REINSTATEMENT

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of
Managing Member/Manager

Thomas E. Doughty

Date 10-08-03

Daytime Phone # 850-932-9671

Typed or printed name of signing Managing Member/Manager